State of Wisconsin Department of Natural Resources PO Box 7921, Madison WI 53707-7921 dnr.wi.gov

Green Tier Application

Form 4800-022 (8/04)

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Notice: Collection of this information is authorized under s. 299.83 Wis. Stats. Participation in Green Tier and completion of this form are voluntary. Personal information collected on this form, including such data as your name, address, phone number, etc., will be used in the implementation of Green Tier and will be made broadly available under the Green Tier program. Information will also be made accessible to requesters under Wisconsin's Public Records Law (ss. 19.32 - 19.39, Wis. Stats.). Applications must be considered complete by the Department of Natural Resources in order to be processed. For application instructions, see "Green Tier Application Instructions," publication number CO-501.

This a	pplica	tion	is a: Tier 1 F	Participation Reques	t	Tier 2 Participatio	n Request	t	
I. App	licant	Info	ormation (add additional for	orms for each entity tha	t is part of the a	pplicant group)			
Person	or Enti	ty N	aine		Title				
Veri	dian	Н	omes LLC-Jeff N	. Simon	Exe	ecutive Vice P	residen	t-Operations	
Street Address					City		State	ZIP Code	
6801 South Towne Drive Telephone Number Fax Number					Madison		WI	53713	
				Fax Number	^	E-Mail Address			
			3140	(608) 223-044:				omes.com	
		for	nation (add additional for	ms for each facility or a	ctivity that is to b				
Facility		n L	domos II C			1.	ounty		
Veridian Homes LLC					Dane City State ZIP Code				
Street Address					Madison		WI		
6801 South Towne Drive Mailing Address					City			53713 ZIP Code	
			n Towne Drive		Madison		State		
			Facility Identification numbers	s (FID #) that anniu to the	<u> </u>	r activety		53713	
r icase	denin	r all i	acinty identification number.	s (FID #) that apply to the	covered lacinty o	activity			
III. Sc	ope of	Gn	en Tier Participation						
Materia	ls in su	ppor	t of this section should be labe	eled Attachment 1.					
Please	descr	ibe 1	he discrete activities to be	covered in the program	n, if the applicati	cn is not for whole-f	acility partic	cipation in Green Tier.	
IV. En	forcer	men	t Record						
Matena	Is in su	ppor	t of this section should be labe	eled Attachment 2. Eligibili	ty requirements ai	re established in s. 299	.83 (3) and (5), Wis Stats	
Has th	e app	licar	nt, managing operators o	f the applicant or any	person with 25	% or more owners	nip interest	t in the applicant:	
Yes	No ✓	a.	Had a judgment of convic		em for a criminal	l violation of an envir	onmental re	egulation involving a	
	_		covered facility or activity? If yes, please provide the date(s) of conviction and the nature of the violation(s).						
			Applicants convicted of months for Tier 2 that re imminent threat to public	a criminal violation w	ithin 60 month	s before the date of health or the enviro	nment or t	n for Tier 1 and 120 that presented an	
	\checkmark	b.	Had a civil judgment ente	red against them for a v	violation of an er	nvironmental regulati	on involving	g a covered facility or	
_	_		activity? If yes, please provide the	date(s) of the judgment	and the nature	of the violation(s)			
			Applicants with a civil ju and 60 months for Tier 2 the program, unless the	udgment entered again I that resulted in subs	nst them within	36 months before	e environn	application for Tier 1 ent are ineligible for	
	\checkmark	C.	Been referred to the Depa activity?	artment of Justice for er	forcement of an	environmental regu	lation involv	ving a covered facility or	
			If yes, please provide the Applicants referred to the Tier 2 are ineligible for the	e Department of Just	ice within 24 m	onths before the d			
	√	d.	d. Been issued an environmental citation by the Department of Natural Resources involving a covered facility or activity? If yes, please provide the date(s) of the citation and the nature of the violation(s). Applicants issued an environmental citation within 24 months before the date of application for Tier 1 and Tier are ineligible for the program, unless the applicant requests a waiver of enforcement record requirements.						
Are vo	u reali	ıesti	ng a waiver from enforce	ement record requires	nents?			-	
Yes	No	2 41	- G		•				
	$\overline{\mathbf{V}}$	lf ·	ves, please attach a justific	cation. Waivers may be	granted in exce	ptional circumstance	ès.		

If yes, please attach a justification. Waivers may be granted in exceptional circumstances

Date Approved

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V. Environmental Performance
Please provide information on the following Tier 1 or Tier 2 activities. Materials in support of this section should be labeled Attachment 3. For definitions of environmental performance and superior environmental performance, refer to Application Instructions.
☑ Tier 1
 Baseline environmental performance report that addresses each covered facility or activity to be included in Green Tier. Within this report establish a baseline date against which future progress may be measured. Current environmental performance (measured against the baseline).
Future plans for enhancing the environment.
Tier 2
 Describe the applicants' record of superior environmental performance and the measures that it proposes to take to maintain and improve its superior environmental performance.
VI. Environmental Management System (EMS)
Materials in support of this section should be labeled Attachment 4.
Yes No
a. Do you have an EMS certified to the International Organization for Standardization standard 14001?
b. Do you have an EMS that is functionally equivalent as determined by the Department of Natural Resources?
If no to both questions, please proceed to next section if you are applying for Tier 1. Tier 2 applicants must have implemented an EMS to be eligible for the program.
If yes to either a. or b., please attach a copy of the following to this application:
 Third Party Certification Environmental Policy Statement Scope Statement Documented Objectives and Targets for the Facility or Activity
VII. Tier 1 Applicant Statement of Commitments
I commit to:
 a. implement, within one year of the date of this application, an EMS that is third party certified to the International Organization for Standardization or is functionally equivalent as determined by the Department of Natural Resources for each covered facility or activity under Green Tier.
 b. conduct annual EMS audits, with every 3rd audit performed by an outside environmental auditor approved by the Department of Natural Resources.
c. submit to the Department of Natural Resources an annual report on the EMS audit that is in compliance with s.299.83 (6m) (a) and progress towards meeting objectives related to improved environmental performance for aspects regulated under chs. 29 to 31,160, and 280 to 299, unregulated environmental aspects, or voluntary actions to restore, enhance, or preserve natural resources.
I commit to the above statements and certify that all information provided is true and correct under penalty of law.
Signature of Applicant Date Signed 4/21/05
VIII. Tier 2 Applicant/Statement of Commitments
I commit to:
a. conduct annual EMS audits performed by an outside environmental auditor approved by the Department of Natural Resources.
b. conduct or have another person conduct an annual audit of compliance with environmental requirements that are applicable to the covered facilities and activities eligible under the program.
c. submit to the Department of Natural Resources an annual report on the EMS audit and the environmental requirements compliance audit and reporting the results in compliance with 299.83 (6m) a. Wis. Stats.
I commit to the above statements and certify that all information provided is true and correct under penalty of law.
Signature of Applicant Date Signed
IX. For Department Use Only

Date Returned to Applicant for Additional Information Date Denied

Date Received Initials of Reviewer Status